

Proposed Amendments to the *Regulations for Administration of the Virginia Hearing Impairment Identification and Monitoring System*
Statement of Anticipated Regulatory Impacts

The law requires actions that exact cost. Hospitals with neonatal intensive care services are required to screen the hearing of all infants prior to discharge from the hospital beginning July 1, 1999. There will be costs to hospitals to purchase equipment and set up newborn hearing screening programs. There will be costs to health plans and Medicaid to reimburse for the tests, if covered. There will be costs to the Virginia Department of Health to maintain the system. No new general funds were provided for this statutory mandate. The law also requires the Board of Health to “provide by regulation for the giving of hearing screening tests for all infants born in all hospitals.” The regulations require all hospitals to screen the hearing of all newborns prior to discharge after birth, beginning July 1, 2000.

Projected Costs to Virginia Department of Health

Fund source/detail:

- 61% Federal and 39% General funds

Program and subprogram:

- 4301200

One-time expenditure:

- design of a new database, reporting and follow-up system, \$77,000.

Ongoing yearly expenditures include:

- staff:
 - Program Support Technician-100% FTE, \$27,321
 - Program Manager-50% FTE, \$34,624.
- maintenance of the database, \$25,000-\$50,000.
- publication and distribution of educational materials, \$15,000.
- publication of annual reports including performance data to birthing hospitals and a statewide epidemiological analysis, \$1,500.
- approval process for diagnostic audiological facilities, \$100.
- convene quarterly Advisory Committee meetings, \$6,000.
- postage on letters to families, \$2,500.
- supplies and travel, \$1,600.

Projected Costs to Hospitals

There are 67 hospitals in Virginia with newborn nurseries. Approximately 22 of those have neonatal intensive care services. There is one hospital with neonatal intensive care services and no newborn nursery. Projected costs include:

- purchase of hearing screening equipment, ranges from \$10,000 - \$15,000.
- supplies, including calibration, ranges from \$.50 - \$10 per infant.

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- Nurse or technician to perform hearing screening; based on \$25/hour wage and benefits, 10-30 minutes per test, ranges from \$4.17 to \$12.50 per infant
- audiologist or nurse to coordinate the program; based on hourly wage and benefits, 25% FTE for audiologist grade 10, \$10,634.

The regulations will require hospitals to report less information to the Virginia Hearing Impairment Identification and Monitoring System than they are currently required to do.

Projected Costs to Persons Providing Audiological Services

There may be additional costs to persons who provide audiological services, as they will be required to report the results of a child's hearing screening and/or diagnostic audiological evaluation to the Virginia Department of Health, as well as to provide specific information to the child's parents and to the child's primary medical care provider. The cost estimate ranges from \$.50 - \$1 per child tested.

Other Entities Affected

Other entities that may be affected by the regulations include Part C Early Intervention Services for Infants and Toddlers with Disabilities and local education agencies. There will be an increase in the number of children identified with hearing loss within the first six months of life, thereby increasing the number of children under one year of age who are referred for early intervention services. However, there will be substantial savings to communities, in particular the educational systems. Research suggests that the costs of special education services are reduced when hearing loss is identified and intervention initiated within the first year of life.